

State of South Dakota  
Statement of Financial Interest  
Elected Official



RECEIVED  
JAN 19 2005  
S.D. SEC. OF STATE

File statement within 15 days after taking your oath of office in the office where your nominating petition or convention nomination certification was filed. Please read information on reverse side before completing this form.

1. Name PAT HALEY  
2. Address 766 UTAH AVE SE, HURON, SD 57352  
3. Elected Office SD HOUSE OF REPRESENTATIVES

If there is no change in your financial interest since the filing of your postnomination statement of financial interest, please sign and return.

Date: 1-19-05 (Signed) PAT HALEY

If there are changes, please complete the following:

4. What is your occupation/profession? \_\_\_\_\_

5. List any enterprise which accounted for more than ten percent of, or contributed more than \$2,000 to, your family's (includes spouse, minor children living at home) gross income in the preceding calendar year. Identify who receives the income from each enterprise.

What is the nature of your immediate family's association with each? The value of the financial interest need not be reported.

6. List any enterprise in which you, your spouse or minor children living at home control more than ten percent of the capital or stock. Identify who has the ownership interest in each enterprise.

What is the nature of your immediate family's association with each?

Filed this 19th day of January, 2005  
Chris Nelson  
SECRETARY OF STATE

State of South Dakota )  
County of \_\_\_\_\_ ) SS.

Verification

I have reviewed paragraphs 1 through 6 of the Information Regarding Statement of Financial Interest (attached), my Statement of Financial Interest and certify that the information reported is a complete, true and accurate representation of my financial interests for the preceding calendar year.

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_ (Signed) \_\_\_\_\_

(Seal)

Officer Administering Oath

RECEIVED

State of South Dakota  
Statement of Financial Interest  
Candidate for Public Office

AUG 05 2004

File statement in the office where your nominating petition or convention nomination certification was filed.

S.D. SEC. OF STATE

Please read information on reverse side before completing this form.

1. Name PAT HALEY
2. Address 766 UTAH AVE SE, HURON, SD 57350
3. Office Sought SD HOUSE OF REPRESENTATIVES
4. What is your occupation/profession? WRITER / TEACHER / COACH

5. List any enterprise which accounted for more than ten percent of, or contributed more than \$2,000 to, your family's (includes spouse, minor children living at home) gross income in the preceding calendar year. Identify who receives the income from each enterprise.

What is the nature of your immediate family's association with each? The value of the financial interest need not be reported.

<u>EAST EAGLE CO. - PAT HALEY</u>	<u>PROPRIETOR</u>
<u>HURON REGIONAL MEDICAL CENTER - JENNE HALEY</u>	<u>EMPLOYEE</u>
<u>LEWIS DRUG, INC. - MAGGIE HALEY</u>	<u>EMPLOYEE</u>
<u>FAIR CITY FOODS, INC. - ANDY HALEY</u>	<u>EMPLOYEE</u>

6. List any enterprise in which you, your spouse or minor children living at home control more than ten percent of the capital or stock. Identify who has the ownership interest in each enterprise.

What is the nature of your immediate family's association with each?

<u>EAST EAGLE CO. - PAT HALEY</u>	<u>OWNER</u>
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Filed on 6<sup>th</sup> day of August, 04

State of South Dakota )  
County of DEADLE ) SS.

Verification

Chris Nelson  
SECRETARY OF STATE

I have reviewed paragraphs 1 through 6 of the Information Regarding Statement of Financial Interest (attached), my Statement of Financial Interest and certify that the information reported is a complete, true and accurate representation of my financial interests for the preceding calendar year.

(Signed) PAT HALEY

Sworn to before me this 4<sup>th</sup> day of August, 2004

(Seal)

Revised 1997

Officer Administering Oath  
My commission expires: JULY 4, 2005